# Retters, Aotes, and Answers.

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#### QUERIES AND ANSWERS.

#### SCARRING AFTER EPILATION.

"JUVENTAS" asks for advice in the treatment of a lady who had superfluous hairs removed—on the Continent—with diathermy, and who now has scarring where this has been done.

#### DANISH TREATMENT OF ITCH.

DR. T. DOUGLAS ROSS (Glasgow) writes: Following Dr. Cannon's direction in his recent article on the Danish treatment of itch (Journal, January 25th, p. 148), I find it impossible to dissolve 1 kg. of sublimated sulphur in 1 kg. 50 per cent. KOH completely, so as to give a clear yellow solution. Gentle heat merely blackens the mixture. I should be obliged if he would point a way out of this difficulty. this difficulty.

### PRURITUS.

DR. W. H. DAVIES writes: I shall be grateful for any help your readers can give me for treating a case of "generalized pruritus," associated with impotence, in a man aged 43. He has had all the usual local and internal remedies, including gland therapy.

## PRECIPITATE EJACULATION.

" N. D." writes: I should be grateful for suggestions as to treatment of a case of premature ejaculation in an otherwise healthy ment of a case of premature ejaculation in an otherwise healthy man of 45. He states that though erection and emission occur normally, the whole process is over in a few seconds, and he is therefore unable to satisfy his wife. In all other respects their marriage is a normal, fertile, and happy one, but the condition described is beginning to tell on their nerves. Various organic extracts of testicle, etc., have been tried and found useless. It is possible that Steinach's vaso-ligation might help, but before recommending this I should like the experience of others who have had to deal with such cases. have had to deal with such cases.

# GLASS PERMEABLE TO ULTRA-VIOLET RAYS.

"FORTY YEARS A SUBSCRIBER" writes: I have been much interested in the articles which have appeared in the British Medical Journal about glass permeable to ultra-violet rays, but before adopting it in my new dwelling-house I would be glad to have independent and authentic information on several points which occur to me. What exactly are the virtues claimed for it? Does it really possess these virtues, and does it retain them unimpaired indefinitely, or does it lose them as time goes on? Is it injurious to the eyes or in any other way? Does its use result in fading of curtains, carpets, etc? Would it be desirable to put it in all windows of a dwelling-house? in the articles which have appeared in the British Medical Journal windows of a dwelling-house?

\* .\* We have submitted this query to a correspondent with special experience, who writes as follows:

The sun's radiance gives a very wide spectrum, of which only a very small part is visible; immediately beyond the violet end are radiations having a high actinic power, and commonly known as ultra-violet rays. These are filtered off to a large extent by the atmosphere; they are plentiful in the High Alps, but scarce in the smoky, misty air of many northern towns. Ordinary window glass also excludes them. The benefit to the body metabolism of a reasonable exposure to ultra-violet radiations, whether from a natural or an artificial source, is now known. whether from a natural or an artificial source, is now known. Vita glass is one of a number of transparent substances that have been devised with a view to getting a form of window glazing that will admit these beneficial rays. There is no doubt that these glasses do achieve this aim; it is true that, after a time, the glasses lose some of their initial virtues, but they retain permanently a high degree of permeability to ultra-violet radiation. Their use does not result in injury to the eyes, any more than does the sunshine out of doors, though some people prefer their spectacle lenses to be impenetrable to ultra-violet rays. In excess, as on the snows of the High Alps, ultra-violet rays are injurious and cause snow blindness. The special glass is more costly—by some 25 per cent.—than ordinary window glass. Its advantage in town will depend on the clearness of the air and its freedom from smoke, and also on the frequency with which the windows are cleaned; a film of smoke on the glass speedily reduces its value. There is nothing gained by putting the glass into windows that have no clear skyscape. For those who spend much of their time out-of-doors there is small need radiation. Their use does not result in injury to the eyes, any who spend much of their time ont-of-doors there is small need for special provision; for invalids who cannot get out of doors the use of a special ghas is an advantage. Paintings, curtains, and carpets are likely to be adversely affected, more than they are by exposure to light passing through ordinary glass, but fabric dyes are now greatly improved and are nearly fast.

#### INCOME TAX.

#### Temporary Cessation of Foreign Employment.

"E. C." is employed abroad by—we assume—a foreign or colonial concern, and proposes to come to England "for about a year" as from September next. He will receive a gratuity on arrival, and will arrange for the remittance to England from abroad of a sum of £1,000 to cover his expenses. Will be be liable to income tax in this country?

We assume that he has not been maintaining a residence in the United Kingdom during his absence. If he intends to return to colonial work it is clear that he will be coming to the United Kingdom "for a temporary purpose only," and therefore will not become a "resident" for income tax purposes unless he spends six months in any particular financial year in this country. Consequently he will not become a resident for the year ending April 5th, 1931 (unless he lands on or before October 5th, 1930), and therefore will not be liable in respect of the payment of £200. The £1,000 represents capital in this. country, and would not be taxable, but if he is in the United Kingdom for six months of the year commencing April 6th, 1931, he will become an "occasional resident," and will be liable in respect of any income from investments that may be remitted to him here.

#### Keep of Assistant.

"L. H. E." inquires what figure is usually taken as a reasonable amount to charge in respect of the keep of an assistant who

\*\* Circumstances vary so much, according to locality, domestic conditions, etc., that it is almost impossible to suggest a "usual" figure, but the amount of £1 per week which the inspector of taxes suggests seems abnormally low. We should regard £2 per week as normal, to include bedroom and service, but that suggestion should be taken as only tentative. It is, after all, a question of fact—that is, by how much the food costs have been increased by the assistant, and what is a fair allocation of the general expenses, rent, rates, domestic service, etc.

#### LETTERS, NOTES, ETC.

#### LARGE HYDROCELES.

Large Hydroceles.

\*E. M. L." (London, S.W.) writes: Dr. P. M. Shepherd's patient's double hydrocele of an aggregate of 101 oz. (February 8th, p. 268) was a respectable swelling, but I believe that the record for a single hydrocele is still held by the six quarts of Edward Gibbon the historian, which must have been very disfiguring in those days of tight breeches. Gibbon himself seems to have had doubts as to this, for he wrote to Lord Sheffield: "Have you never observed, through my incapressibles, a large prominency, which, as it was not at all painful and very little troublesome, I had strangely neglected for many years?" Even if the six quarts were of only 32 oz. each, instead of the 40 oz. of imperial measure, the total of 192 oz. overtops the Nigerian's 61.

#### THE ACCOUCHEUR'S NAIL BRUSH.

DR. R. MACKINNON (Oldham) writes: In view of the correspondence about maternal mortality from sepsis, I wonder how many cases could be traced to the nail brush which is part of the equipment of every midwifery bag. It is impossible to get it efficiently sterilized, and is at any time a danger to patient and operator alike.

#### A WARNING.

DR. A. NELL, who was in this country for some months last year and attended the Manchester meeting as representative of the Ceylon Branch, writes: After my return to Kandy I have learnt that some-one calls on, or writes to, people in England pretending to be me. This is to warn my fellow practitioners.

# VACANCIES.

NOTIFICATIONS of offices vacant in universities, medical colleges, and of vacant resident and other appointments at hospitals, will be found at pages 47, 48, 49, 50, 51, 54, 55, and 56 of our advertisement columns, and advertisements as to partnerships, assistantships, and locumtenencies at pages 52 and 53.

A short summary of vacant posts notified in the advertisement columns appears in the Supplement at page 55.